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Substitute for form 1449/PTO	Coi	Complete if Known		
	Application Number			
INFORMATION DISCLOSURE	Filing Date	03/31/2004		
	First Named Inventor	POITRAS, Brian		
STATEMENT BY APPLICANT	Art Unit			
(Use as many sheets as necessary)	Examiner Name			
Sheet 1 of 2	Attorney Docket Number	POB-501US		

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	. Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Cite	Cite No.1		Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
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Complete if Known Substitute for form 1449/PTO **Application Number** INFORMATION DISCLOSURE Filing Date 03/31/2004 STATEMENT BY APPLICANT **First Named Inventor** POITRAS, Brian Art Unit (Use as many sheets as necessary) **Examiner Name**

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Sheet

12

		NON PATENT LITERATURE DOCUMENTS	
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